POSITION	INITIALS	ID NO.	DATE
		71530	1/29
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	2/10/00
FORMALITY REVIEW		7212/	2/15/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	....	Non-elected
=	.... Allowed		I	....	Interference
—	(Through numeral)... Canceled		A	....	Appeal
÷	.... Restricted		O	....	Objected

Claim		Date										Claim		Date										Claim		Date									
Final	Original											Final	Original											Final	Original										
	1	✓	✓										51												101										
	2	✓	✓										52												102										
	3	✓	✓										53												103										
	4	✓	✓										54												104										
	5	✓	✓										55												105										
	6	✓	✓										56												106										
	7	✓	✓										57												107										
	8	✓	✓										58												108										
	9	✓	✓										59												109										
	10	✓	✓										60												110										
	11	✓	✓										61												111										
	12	✓	✓										62												112										
	13	✓	✓										63												113										
	14	✓	✓										64												114										
	15	✓	✓										65												115										
	16	✓	✓										66												116										
	17	✓	✓										67												117										
	18	✓	✓										68												118										
	19	✓	✓										69												119										
	20	✓	✓										70												120										
	21	✓	✓										71												121										
	22	✓	✓										72												122										
	23	✓	✓										73												123										
	24	✓	✓										74												124										
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	49												99												149										
	50												100												150										

If more than 150 claims or 10 actions
staple additional sheet here

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